

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5  
HellerHighWater PAC

ADDRESS (number and street) PO Box 370672  
 Check if different than previously reported. (ACC) Las Vegas NV 89137

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
C C00471607 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M / D D / Y Y Y Y Y Y in the State of    
(d) 30-Day POST-Election Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y Y Y 08 / 01 / 2016 through M M / D D / Y Y Y Y Y Y 08 / 31 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Chrissie Hastie

Signature of Treasurer Chrissie Hastie [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 09 / 20 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**HellerHighWater PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="144002.97"/>	<input type="text" value="144002.97"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="185910.17"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="56486.69"/>	<input type="text" value="391622.69"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="242396.86"/>	<input type="text" value="535625.66"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="20769.67"/>	<input type="text" value="313998.47"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="221627.19"/>	<input type="text" value="221627.19"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

DETAILED SUMMARY PAGE  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

HellerHighWater PAC

Report Covering the Period: From: 08 / 01 / 2016 To: 08 / 31 / 2016

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3500.00	35500.00
(ii) Unitemized .....	415.00	1051.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	3915.00	36551.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	13000.00	305500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	16915.00	342051.00
12. Transfers From Affiliated/Other Party Committees.....	39571.69	39571.69
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	10000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	56486.69	391622.69
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	56486.69	391622.69

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	15769.67	138998.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	15769.67	138998.47
22. Transfers to Affiliated/Other Party Committees.....	0.00	30000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	145000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	20769.67	313998.47
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20769.67	313998.47

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	16915.00	342051.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	16915.00	342051.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	15769.67	138998.47
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	15769.67	138998.47

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**HellerHighWater PAC**

**A. Mr. Richard Dyke**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 999 Roosevelt Trail  
 City Windham State ME Zip Code 04062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Dyke Associates Occupation Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 10 / 2016  
**Transaction ID : 60818.C599**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Receipt

**B. Honorable Brian Krolicki**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 7033  
 City Lake Tahoe State NV Zip Code 89449  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Brian K. Krolicki LLC Occupation Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2016  
**Transaction ID : 60918.C608**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Receipt

**C. Dr. Jerry Matsumura**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1394 Amado Court  
 City Reno State NV Zip Code 89511  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Employed Occupation Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 17 / 2016  
**Transaction ID : 60818.C602**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 25  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**HellerHighWater PAC**

Full Name (Last, First, Middle Initial)  
**A. Mr. Greg McKay**  
 Mailing Address PO Box 4720  
 City State Zip Code  
 Incline Village NV 89450  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NV State Development Corp. Loan Officer  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2016  
**Transaction ID : 60818.C600**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 Receipt

Full Name (Last, First, Middle Initial)  
**B. Mr. Andrew Olmem**  
 Mailing Address 2700 Clarendon Boulevard #E314  
 City State Zip Code  
 Arlington VA 22201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Venable Executive  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2016  
**Transaction ID : 60918.C607**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 Receipt

Full Name (Last, First, Middle Initial)  
**C. Mr. James Rybicki**  
 Mailing Address PO Box 6662  
 City State Zip Code  
 Incline Village NV 89450  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 BKR Investments Investor  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2016  
**Transaction ID : 60818.C601**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2000.00  
**TOTAL** This Period (last page this line number only)..... ▶ 3500.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 25
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HellerHighWater PAC**

Full Name (Last, First, Middle Initial)  
**A. Altria Group Inc. PAC**

Mailing Address 101 Constitution Avenue NW #400W

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2016  
**Transaction ID : 60918.C609**

Amount of Each Receipt this Period  
2500.00

Memo Item  
Receipt

Full Name (Last, First, Middle Initial)  
**B. Amazon PAC**

Mailing Address 601 New Jersey Avenue NW #900

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00360354

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2016  
**Transaction ID : 60818.C605**

Amount of Each Receipt this Period  
2500.00

Memo Item  
Receipt

Full Name (Last, First, Middle Initial)  
**C. American Health Care Association PAC**

Mailing Address 1201 L Street NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00006080

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2016  
**Transaction ID : 60818.C604**

Amount of Each Receipt this Period  
2500.00

Memo Item  
Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 25
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HellerHighWater PAC**

**A. Verizon Communications Inc/**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Verizon Wireless Good Govt PAC  
 1300 I Street NW 4th Floor  
 City Washington State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C** C00186288  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2016  
**Transaction ID : 60818.C603**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item  
 Receipt

**B. Wal-Mart Stores Inc. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 702 SW 8th Street  
 City Bentonville State AR Zip Code 72716  
 FEC ID number of contributing federal political committee. **C** C00093054  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2016  
**Transaction ID : 60918.C610**  
 Amount of Each Receipt this Period  
 3000.00  
 Memo Item  
 Receipt

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	13000.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 25
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HellerHighWater PAC**

**A. 2016 Senate Majority JFC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 751271  
 City Las Vegas State NV Zip Code 89136-  
 FEC ID number of contributing federal political committee. **C** C00619999  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 39571.69

Date of Receipt 08 / 31 / 2016  
**Transaction ID : 60918.C612**  
 Amount of Each Receipt this Period 39571.69  
 Memo Item  
 Transfers From Affil./Auth.

**B. Mr. Frank Fertitta III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 379045  
 City Las Vegas State NV Zip Code 89137-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Station Casinos Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 04 / 2016  
**Transaction ID : 60920.C619**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Transfer Memo

**C. Mrs. Jill Fertitta**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 379045  
 City Las Vegas State NV Zip Code 89137-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Homemaker Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 04 / 2016  
**Transaction ID : 60920.C620**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Transfer Memo

<b>SUBTOTAL</b> of Receipts This Page (optional).....	39571.69
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 25
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HellerHighWater PAC**

**A. Mr. Anthony Marnell II**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 222 Via Marnell Way  
 City Las Vegas State NV Zip Code 89119-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Employed Occupation Physician  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 2500.00

Date of Receipt 07 / 28 / 2016  
**Transaction ID : 60920.C625**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
 Transfer Memo

**B. Mr. Philip Peckman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 371446  
 City Las Vegas State NV Zip Code 89137-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Peckman Capital Occupation Executive  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 416.66

Date of Receipt 07 / 28 / 2016  
**Transaction ID : 60920.C629**  
 Amount of Each Receipt this Period 416.66  
 Memo Item  
 Transfer Memo

**C. Mr. Ike Lawrence Epstein**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 213 Luxaire Court  
 City Las Vegas State NV Zip Code 89144-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Zuffa LLC Occupation Executive  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 416.66

Date of Receipt 07 / 28 / 2016  
**Transaction ID : 60920.C618**  
 Amount of Each Receipt this Period 416.66  
 Memo Item  
 Transfer Memo

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 25
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HellerHighWater PAC**

**A. Mr. Robert Baldwin**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 7700

City Las Vegas	State NV	Zip Code 89177-
FEC ID number of contributing federal political committee. C		
Name of Employer .Information Requested	Occupation .Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Date of Receipt  
07 / 28 / 2016  
Transaction ID : 60920.C616

Amount of Each Receipt this Period  
1500.00

Memo Item  
Transfer Memo

**B. Mr. Maurice Gallagher**  
Full Name (Last, First, Middle Initial)  
Mailing Address 8350 South Durango Drive #210

City Las Vegas	State NV	Zip Code 89113-
FEC ID number of contributing federal political committee. C		
Name of Employer .Information Requested	Occupation .Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt  
07 / 21 / 2016  
Transaction ID : 60920.C621

Amount of Each Receipt this Period  
5000.00

Memo Item  
Transfer Memo

**C. Mr. James Murren**  
Full Name (Last, First, Middle Initial)  
Mailing Address 9101 West Sahara Avenue #105-H9

City Las Vegas	State NV	Zip Code 89117-
FEC ID number of contributing federal political committee. C		
Name of Employer .Information Requested	Occupation .Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Date of Receipt  
07 / 28 / 2016  
Transaction ID : 60920.C627

Amount of Each Receipt this Period  
2000.00

Memo Item  
Transfer Memo

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 25
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**HellerHighWater PAC**

**A. Mr. Kirk Hendrick**  
Full Name (Last, First, Middle Initial)

Mailing Address 2557 Red Arrow Drive

City Las Vegas State NV Zip Code 89135-

FEC ID number of contributing federal political committee. **C**

Name of Employer .Information Requested Occupation .Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 416.66

Date of Receipt 07 / 28 / 2016  
**Transaction ID : 60920.C622**

Amount of Each Receipt this Period 416.66

Memo Item  
Transfer Memo

**B. Mr. Mike Sloan**  
Full Name (Last, First, Middle Initial)

Mailing Address 7960 Castle Pines Avenue

City Las Vegas State NV Zip Code 89113-

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 28 / 2016  
**Transaction ID : 60920.C633**

Amount of Each Receipt this Period 2500.00

Memo Item  
Transfer Memo

**C. Mr. Bill Miller**  
Full Name (Last, First, Middle Initial)

Mailing Address 4895 Convair Drive

City Carson City State NV Zip Code 89706-

FEC ID number of contributing federal political committee. **C**

Name of Employer Bill Miller Engineering Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 416.66

Date of Receipt 07 / 21 / 2016  
**Transaction ID : 60920.C626**

Amount of Each Receipt this Period 416.66

Memo Item  
Transfer Memo

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 25
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HellerHighWater PAC**

**A. Mr. Albert Seeno Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4021 Port Chicago Highway  
 City State Zip Code  
 Concord CA 94520-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Albert Seeno Construction Co. Owner  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 416.66

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2016  
**Transaction ID : 60920.C632**  
 Amount of Each Receipt this Period  
 416.66  
 Memo Item  
 Transfer Memo

**B. Mr. Thomas Seeno**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1850 Mount Diablo Boulevard #440  
 City State Zip Code  
 Walnut Creek CA 94596-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Seeno Construction Co. Owner  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 416.66

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2016  
**Transaction ID : 60920.C631**  
 Amount of Each Receipt this Period  
 416.66  
 Memo Item  
 Transfer Memo

**C. Mr. William Paganetti**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 380 Brinkby Avenue #B  
 City State Zip Code  
 Reno NV 89509-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Peppermill Casinos Inc. Owner  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 416.66

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2016  
**Transaction ID : 60920.C628**  
 Amount of Each Receipt this Period  
 416.66  
 Memo Item  
 Transfer Memo

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 25
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HellerHighWater PAC**

**A. Mr. Frederick Hitchcock**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9101 Alta Drive #J-1702  
 City Las Vegas State NV Zip Code 89145-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hitchcock Automotive Occupation Auto Dealer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **5000.00**

Date of Receipt **06 / 17 / 2016**  
**Transaction ID : 60920.C623**  
 Amount of Each Receipt this Period **5000.00**  
 Memo Item  
 Transfer Memo

**B. Mr. Anthony Marnell III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 58 Olympia Hills Circle  
 City Las Vegas State NV Zip Code 89141-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Marnell Companies Occupation Architect  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2500.00**

Date of Receipt **07 / 21 / 2016**  
**Transaction ID : 60920.C624**  
 Amount of Each Receipt this Period **2500.00**  
 Memo Item  
 Transfer Memo

**C. Mr. Corey Sanders**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14 Ridge Blossom Road  
 City Las Vegas State NV Zip Code 89135-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MGM Resorts International Occupation COO  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **07 / 28 / 2016**  
**Transaction ID : 60920.C630**  
 Amount of Each Receipt this Period **1000.00**  
 Memo Item  
 Transfer Memo

**SUBTOTAL** of Receipts This Page (optional)..... **0.00**  
**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 25  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**HellerHighWater PAC**

Full Name (Last, First, Middle Initial)  
**A. Zuffa PAC**

Mailing Address 2350 Kerner Boulevard #250

City San Rafael State CA Zip Code 94901-

FEC ID number of contributing federal political committee. **C** C00459693

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2916.66

Date of Receipt  
MM / DD / YYYY  
07 / 28 / 2016

**Transaction ID : 60920.C617**

Amount of Each Receipt this Period  
416.66

Memo Item  
Transfer Memo

Full Name (Last, First, Middle Initial)  
**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

Full Name (Last, First, Middle Initial)  
**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	39571.69



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**HellerHighWater PAC**

Full Name (Last, First, Middle Initial)

**A. Edgar Abrams**

Mailing Address 1391 Pennsylvania Ave. SE #250

City Washington State DC Zip Code 20003-

Purpose of Disbursement  
Consulting Management

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 20 / 2016

**Transaction ID : 60918.E604**

Amount of Each Disbursement this Period

2290.00

Memo Item  
CONSULTING MANAGEMENT

Full Name (Last, First, Middle Initial)

**B. Anedot**

Mailing Address 10156 Perkins Rowe #17F

City Baton Rouge State LA Zip Code 70810-

Purpose of Disbursement  
Merchant Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 03 / 2016

**Transaction ID : 60818.E590**

Amount of Each Disbursement this Period

4.72

Memo Item  
MERCHANT PROCESSING FEES

Full Name (Last, First, Middle Initial)

**C. Anedot**

Mailing Address 10156 Perkins Rowe #17F

City Baton Rouge State LA Zip Code 70810-

Purpose of Disbursement  
Merchant Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 04 / 2016

**Transaction ID : 60818.E591**

Amount of Each Disbursement this Period

9.18

Memo Item  
MERCHANT PROCESSING FEES

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2303.90

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**HellerHighWater PAC**

Full Name (Last, First, Middle Initial)

**A. Anedot**

Mailing Address 10156 Perkins Rowe #17F

City State Zip Code  
Baton Rouge LA 70810-

Purpose of Disbursement  
Merchant Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 10 / 2016

**Transaction ID : 60818.E592**

Amount of Each Disbursement this Period

18.77

Memo Item  
MERCHANT PROCESSING FEES

Full Name (Last, First, Middle Initial)

**B. Anedot**

Mailing Address 10156 Perkins Rowe #17F

City State Zip Code  
Baton Rouge LA 70810-

Purpose of Disbursement  
Merchant Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 23 / 2016

**Transaction ID : 60918.E594**

Amount of Each Disbursement this Period

33.60

Memo Item  
MERCHANT PROCESSING FEES

Full Name (Last, First, Middle Initial)

**C. Anedot**

Mailing Address 10156 Perkins Rowe #17F

City State Zip Code  
Baton Rouge LA 70810-

Purpose of Disbursement  
Merchant Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 30 / 2016

**Transaction ID : 60918.E595**

Amount of Each Disbursement this Period

1.67

Memo Item  
MERCHANT PROCESSING FEES

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

54.04

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**HellerHighWater PAC**

Full Name (Last, First, Middle Initial)

**A. Eagle Promotions**

Mailing Address 4575 West Post Road #100

City Las Vegas State NV Zip Code 89118-

Purpose of Disbursement  
Printing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 20 / 2016

**Transaction ID : 60918.E603**

Amount of Each Disbursement this Period

2046.74

Memo Item  
PRINTING

Full Name (Last, First, Middle Initial)

**B. In Compliance Inc.**

Mailing Address PO Box 751271

City Las Vegas State NV Zip Code 89136-

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2016

**Transaction ID : 60818.E584**

Amount of Each Disbursement this Period

63.08

Memo Item  
TRAVEL

Full Name (Last, First, Middle Initial)

**C. In Compliance Inc.**

Mailing Address PO Box 751271

City Las Vegas State NV Zip Code 89136-

Purpose of Disbursement  
Printing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2016

**Transaction ID : 60818.E583**

Amount of Each Disbursement this Period

40.50

Memo Item  
PRINTING

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

2150.32

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**HellerHighWater PAC**

Full Name (Last, First, Middle Initial)

**A. In Compliance Inc.**

Mailing Address PO Box 751271

City Las Vegas State NV Zip Code 89136-

Purpose of Disbursement  
Compliance Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2016

**Transaction ID : 60818.E582**

Amount of Each Disbursement this Period

1500.00

Memo Item  
COMPLIANCE CONSULTING

Full Name (Last, First, Middle Initial)

**B. November Inc.**

Mailing Address PO Box 372672

City Las Vegas State NV Zip Code 89137-

Purpose of Disbursement  
Consulting Strategy

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2016

**Transaction ID : 60818.E585**

Amount of Each Disbursement this Period

2500.00

Memo Item  
CONSULTING STRATEGY

Full Name (Last, First, Middle Initial)

**C. October Inc.**

Mailing Address PO Box 372672

City Las Vegas State NV Zip Code 89137-

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2016

**Transaction ID : 60818.E587**

Amount of Each Disbursement this Period

6.00

Memo Item  
TRAVEL

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4006.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**HellerHighWater PAC**

Full Name (Last, First, Middle Initial)

**A. October Inc.**

Mailing Address PO Box 372672

City Las Vegas State NV Zip Code 89137-

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2016

**Transaction ID : 60818.E588**

Amount of Each Disbursement this Period

11.82

Memo Item  
POSTAGE

Full Name (Last, First, Middle Initial)

**B. October Inc.**

Mailing Address PO Box 372672

City Las Vegas State NV Zip Code 89137-

Purpose of Disbursement  
Consulting Fundraising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2016

**Transaction ID : 60818.E586**

Amount of Each Disbursement this Period

6920.00

Memo Item  
CONSULTING FUNDRAISING

Full Name (Last, First, Middle Initial)

**C. MaryJane Stewart**

Mailing Address 1899 Canvas Edge Drive

City Henderson State NV Zip Code 89044-

Purpose of Disbursement  
Valet Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 29 / 2016

**Transaction ID : 60918.E602**

Amount of Each Disbursement this Period

100.00

Memo Item  
VALET SERVICES

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7031.82

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 25			
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**HellerHighWater PAC**

Full Name (Last, First, Middle Initial) <b>A. MaryJane Stewart</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2016
Mailing Address 1899 Canvas Edge Drive		<b>Transaction ID : 60918.E619</b>
City Henderson	State NV	
Purpose of Disbursement See Below/Airfare	Zip Code 89044-	<input type="checkbox"/> Memo Item SEE BELOW/AIRFARE
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Southwest Airlines</b>		Date of Disbursement MM / DD / YYYY 08 / 10 / 2016
Mailing Address PO Box 36611		<b>Transaction ID : 60918.E600</b>
City Dallas	State TX	
Purpose of Disbursement AIRFARE	Zip Code 75235-	<input checked="" type="checkbox"/> Memo Item MEMO: AIRFARE
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MaryJane Stewart</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2016
Mailing Address 1899 Canvas Edge Drive		<b>Transaction ID : 60918.E597</b>
City Henderson	State NV	
Purpose of Disbursement See Below/Office Supplies	Zip Code 89044-	<input type="checkbox"/> Memo Item SEE BELOW/OFFICE SUPPLIES
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	97.81
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**HellerHighWater PAC**

Full Name (Last, First, Middle Initial)

**A. Michaels Store**

Mailing Address 1251 South Decatur Boulevard

City Las Vegas State NV Zip Code 89102-

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
08 / 10 / 2016

**Transaction ID : 60918.E598**

Amount of Each Disbursement this Period

4.85

Memo Item  
MEMO: OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 6677 Las Vegas Boulevard South #10

City Las Vegas State NV Zip Code 89119-

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
08 / 10 / 2016

**Transaction ID : 60918.E599**

Amount of Each Disbursement this Period

17.96

Memo Item  
MEMO: OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

**C. MaryJane Stewart**

Mailing Address 1899 Canvas Edge Drive

City Henderson State NV Zip Code 89044-

Purpose of Disbursement  
See Below/Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
08 / 29 / 2016

**Transaction ID : 60918.E596**

Amount of Each Disbursement this Period

6.78

Memo Item  
SEE BELOW/MEALS

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6.78

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**HellerHighWater PAC**

Full Name (Last, First, Middle Initial)

**A. Einsteins Bagels**

Mailing Address 4010 South Rainbow Boulevard #B

City Las Vegas State NV Zip Code 89103-

Purpose of Disbursement  
MEALS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 11 / 2016

**Transaction ID : 60918.E601**

Amount of Each Disbursement this Period

6.78

Memo Item  
MEMO: MEALS

Full Name (Last, First, Middle Initial)

**B. Tagged Digital**

Mailing Address 10697 West Centennial Parkway #204

City Las Vegas State NV Zip Code 89166-

Purpose of Disbursement  
Email Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2016

**Transaction ID : 60818.E581**

Amount of Each Disbursement this Period

59.00

Memo Item  
EMAIL SERVICES

Full Name (Last, First, Middle Initial)

**C. Tagged Digital**

Mailing Address 10697 West Centennial Parkway #204

City Las Vegas State NV Zip Code 89166-

Purpose of Disbursement  
Website Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2016

**Transaction ID : 60818.E580**

Amount of Each Disbursement this Period

60.00

Memo Item  
WEBSITE SERVICES

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

119.00

15769.67



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**HellerHighWater PAC**

Full Name (Last, First, Middle Initial)

**A. Georgians For Isakson**

Mailing Address PO Box 250116

City Atlanta State GA Zip Code 30325-

Purpose of Disbursement  
GENERAL 2016

Candidate Name  
**JOHN HARDY ISAKSON**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: GA District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 15 / 2016

**Transaction ID : 60818.E593**

Amount of Each Disbursement this Period

5000.00

Memo Item  
GENERAL 2016

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5000.00

5000.00